The second part of the book relates to clinical applications. The various types of gastrointestinal endoscopy are well covered, including newer procedures such as endoscopic polypectomy, choledochoscopy and retrograde cholangiopancreatography. Pediatric endoscopy as well as laparoscopy also are well covered. Sections on both gynecologic endoscopy and thoracic endoscopy are fairly extensive and procedures using both rigid and fiberoptic flexible instruments are discussed. Special topics including nephroscopy, arthroscopy, stereoencephaloscopy and retroperitoneoscopy are also covered. These subjects are discussed by specialists in their respective fields and there are 58 coauthors. It is a very readable book and should be an invaluable reference work.

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THE MITRAL VALVE—A Pluridisciplinary Approach—Edited by Daniel Kalmanson, MD, Director of Clinical Teaching, Chief, Department of Cardiology, Cardiovascular Research Center ARNTIC, Foundation A. de Rothschild, Paris. Publishing Sciences Group Inc., 162 Great Rd., Acton, MA (01720), 1976. 576 pages, $25.00.

Daniel Kalmanson, MD, has collected in one book the major scientific papers presented at the International Symposium on the Mitral Valve held in Paris in May of 1975. His purpose is to present the latest information on the mitral heart valve acquired in many different disciplines and to integrate these data into one comprehensive work. The scientific papers which make up the 48 chapters of this book are divided into ten sections in a logical order of presentation. Each chapter is followed by a general discussion and a summary of important points.

Part one reviews the anatomy and physiology of the mitral valve apparatus and presents a new classification by Yacoula which permits accurate identification of individual chordae. The present trend toward a broader and more functional concept of the normal and the diseased mitral apparatus is presented. Part two discusses the pathology of natural and artificial mitral valves, including the prolapsing mitral valve leaflet syndrome. Parts three, four and five present pressure-flow relationships and motion of normal, diseased and artificial valves. The utilization of electromagnetic, ultrasonic and differential pressure transducer techniques for measuring blood velocity and blood flow across the mitral valve are discussed. The importance of a knowledge of instanteous mitral flow rate and velocity for understanding mitral valve physiology, pathophysiology and surgical correction is demonstrated. Emphasis is placed on new data obtained by electromagnetic, Doppler and ultrasonic investigations. Roelandt discusses pulsed, reflected ultrasound and Baker discusses the quantitation of mitral regurgitation using a gated Doppler technique.

The role of atrial and ventricular performances and particularly the time course and optimal timing for mitral valve operation is discussed in part 7. A major section of the work is devoted to artificial valves (Part 8), tissue valves (Part 9) and reconstructive surgical procedures on the natural heart valve (Part 10). The book concludes that the ideal prosthetic mitral valve remains to be developed and all of the types used at present are plagued by the risk of thromboembolic complications. Mitral valve replacement, therefore, should only be undertaken when all other possibilities are ruled out.

With tissue valves there is reported to be a lower risk of thromboembolism and anticoagulation is not required, but these valves do not possess the durability of prosthetic heart valves. Tissue valves are recommended for pulmonary and tricuspid valve replacement in all patients, for aortic and mitral valve replacement in women of child-bearing age, and for use in patients who may be difficult or dangerous to maintain on anticoagulation. Recognizing the inadequacy of both artificial and tissue valves, Drs. Carpentier (France), Dury and Angell (United States) maintain that as many as 40 percent of the mitral valve abnormalities need not be replaced but can in fact be repaired utilizing reconstructive surgical techniques. The technique of prosthetic ring annuloplasty described by Carpentier and co-workers represents a major accomplishment in mitral valve surgical operation. The procedure, however, may be technically more difficult to carry out correctly than valve replacement.

In spite of the wide range of the presentations and the complexity of the topics, the book provides an integrated approach to understanding the normal and abnormal mitral valvular apparatus. It is an important reference source for all those interested in the mitral valvular abnormalities.

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PERINATAL MEDICINE—4th European Congress of Perinatal Medicine—Edited by Z. K. Stembera, K. Polácek and V. Sabata; Co-editors: P. M. Dunn, H. F. R. Prechtl and E. Saling. Publishing Sciences Group Inc., 162 Great Rd., Acton, MA (01720), 1975. 556 pages, $25.00.

This book presents a series of abstracts from the biennial congress of the European Association of Perinatal Medicine held in 1974 in Prague, Czechoslovakia. The editors have chosen three of the major topics and included abstracts related to these topics along with the chairman's conclusions on each. The topics include (1) antenatal diagnosis of the "at risk" infant, (2) premature delivery and (3) preterm infant.

Czechoslovakia has a low perinatal mortality rate and so was an appropriate host country. Participation in this fourth congress showed the continued and significant growth of interests and organization of European perinatologists. The participants represented about every country in eastern and western Europe along with several American contributors.

Each major topic is given approximately equal length in this book. Considering the abstract format, the illustrations are very good; but as expected, the text, methods and references are limited. The abstracts on these topics represent a review of most of the techniques available in evaluating at-risk infants and touched on most of the current knowledge as of 1974. A series of papers evaluated at-risk infants at one, two, four and more years later. The concluding remarks appropriately noted many of the infants so identified turn out to be normal, so that further work is needed to better define those newborn infants with significant future risk factors.

The major problem with this type of publication is centered on its abstract form. This form, of necessity, is too brief to give anything but an overview of current work. The audience that would most benefit from this book would be perinatologists. I believe that in this book there is very little present dating from the 1974 congress that would be new to a perinatologist who keeps up with the literature.

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